

**INTERSTATE COMPACT ON JUVENILES  
PETITION FOR REQUISITION TO RETURN A RUNAWAY JUVENILE**

Michigan Family Independence Agency



FORM A

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I, \_\_\_\_\_, being the \_\_\_\_\_  
(Name of Parent or Guardian) (Relationship)

of \_\_\_\_\_ born on \_\_\_\_\_  
(Name of Juvenile) (Date of Birth) (Race/Sex)

do hereby petition \_\_\_\_\_ for the issuance of a requisition for the return of said  
(Name of Court)

juvenile from \_\_\_\_\_ or any other place in which he/she may be found.  
(Location of juvenile, if known)

By reason of said juvenile's age, such return is essential. (Attach additional information if necessary.) In support of this petition and in order that the court may have necessary information pursuant to Article IV of the Interstate Compact on Juveniles, be it known that said juvenile should legally be in my custody and control for the reasons set forth on the attached document(s). To the best of my knowledge, said juvenile has not been adjudicated delinquent, but has run away under the following circumstances and/or for the following reasons:

Attached hereto and in support hereof, I offer the following:

I have read the foregoing Petition and the contents of said Petition are true and correct to the best of my knowledge.

Signed: \_\_\_\_\_  
(Parent or Guardian) (Date)

Address: \_\_\_\_\_

**(It is essential that the above petition be "verified by affidavit" and that certain things be done in accordance with the provisions of Article IV of the Compact, which should be reviewed before preparing this form.)**

**AFFIDAVIT OF VERIFICATION**

On this \_\_\_\_\_ day of \_\_\_\_\_ personally appeared before me \_\_\_\_\_,  
proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument and  
acknowledged that ☐ he ☐ she executed the same.

Subscribed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_

NOTARY PUBLIC

Residing at: \_\_\_\_\_

My Commission expires: \_\_\_\_\_

AUTHORITY: Public Act 203, 1958  
COMPLETION: Required.  
PENALTY: Juvenile may not be returned.

The Family Independence Agency will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to an FIA office in your county.